



#10/RCE
RCE Review
10/12/03

Approved for use through 04/30/2003. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Request
For
Continued Examination (RCE)
Transmittal
Address to:
Commissioner for Patents
Box RCE
Washington, DC 20231

Application Number	09/894,084
Filing Date	June 28, 2001
First Named Inventor	Alok Dev
Art Unit	2823
Examiner Name	Foong, Suk San
Attorney Docket Number	US010292

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission required under 37 CFR 1.114

a. Previously submitted

- Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on _____
(Any unentered amendment(s) referred to above will be entered.)
- Consider the arguments in the Appeal Brief or Rely Brief previously filed on _____
- Other _____

b. Enclosed

i. <input checked="" type="checkbox"/> Amendment/Reply	iii. <input type="checkbox"/> Information Disclosure Statement (IDS)
ii. <input type="checkbox"/> Affidavit(s)/ Declaration(s)	iv. <input type="checkbox"/> Other _____

2. Miscellaneous

a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)

b. Other _____

3. Fees

The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. The Director is hereby authorized to charge the following fees, or credit any overpayments, to

a. Deposit Account No. 11-0223

- RCE fee required under 37 CFR 1.17(e)
- Extension of time fee (37 CFR 1.136 and 1.17)
- Other _____

b. Check in the amount of \$ _____ enclosed

c. Payment by credit card (Form PTO-2038 enclosed)

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type)	Jeffrey I. Kaplan.	Registration No. (Attorney/Agent)	34,356
Signature	6/16/03		

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, Box RCE, Washington, DC 20231, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Name (Print/Type)	Jeffrey I. Kaplan	Date	6/16/03
Signature	6/16/03		

Page 1 of 2

This collection of information is required by 37 CFR 1.114. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Box RCE, Washington, DC 20231.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

06/10/2003 WHOHMM1 00000056 110223 09894084

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

RCE **019103**

Application or Docket Number

09/894084

CLAIMS AS FILED - PART I

TOTAL CLAIMS	(Column 1)	(Column 2)
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	- minus 20 =	*
INDEPENDENT CLAIMS	- minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	** =
Independent			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

SMALL ENTITY	TYPE	OTHER THAN OR SMALL ENTITY
	RATE	FEE
OR	BASIC FEE	370.00
OR	X\$ 9=	
OR	X42=	
OR	+140=	
OR	TOTAL	

SMALL ENTITY	OTHER THAN OR SMALL ENTITY
	RATE
OR	ADDITIONAL FEE
OR	X\$ 9=
OR	X42=
OR	+140=
OR	TOTAL ADDITIONAL FEE

AMENDMENT B	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	** =
Independent			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

AMENDMENT B	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
OR	X\$ 9=		X\$ 18=	
OR	X42=		X84=	
OR	+140=		+280=	
OR	TOTAL ADDITIONAL FEE		TOTAL ADDITIONAL FEE	

AMENDMENT C	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	** =
Independent			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

AMENDMENT C	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
OR	X\$ 9=		X\$ 18=	
OR	X42=		X84=	
OR	+140=		+280=	
OR	TOTAL ADDITIONAL FEE		TOTAL ADDITIONAL FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.